

SUMMARY REPORT ON THE HPV INFORMATION/IMMUNIZATION STATUS OF SIXTH GRADE FEMALES STUDENTS ENROLLED IN SCHOOL

SCHOOL YEAR _____

Name of School Corporation		CODES	
Name of School		County Number	
Address of School		Corporation Number	
City	County	School Number	
Zip Code	School Telephone Number		

6

The number of 6th grade female students who:

Have received ONE dose of HPV vaccine

A.

Have received TWO doses of HPV vaccine

B.

Have received THREE doses of HPV vaccine

C.

Will receive the HPV vaccine

D.

The number of parents who don't want their daughters to receive HPV vaccine

E.

The number of parents who choose not to provide this information

F.

Per IC 20-34-4-Sec. 5.5(a) Each school that enrolls grade 6 female students shall require the parent of a female student entering grade 6 to furnish not later than the twenty (20) school days after the first day of school a written statement prescribed by the state department of health under subsection (b) stating that the parent has received the information required under section 3(b) of this chapter and that:

(1) the student has received or is receiving the immunization;

(2) the parent has decided not to have the student immunized; or

(3) the parent chooses not to provide the information to the school concerning whether the student was immunized; against the human papillomavirus (HPV) infection.

(b) The state department of health shall prescribe the format for the written statement required under subsection (a).

(c) A student may not be prevented from enrolling in, attending, or graduating from school for the sole reason that the student has not provided the school with the written statement required under this section.

As added by P.L.80-2007, SEC.2.

Signatures: _____
Superintendent

Prepared By: _____

Return this completed form to:
Indiana State Department of Health
Immunization Program, 6A
2 North Meridian Street
Indianapolis, IN 46204-3003